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THE MEDICAL MISSION SISTERS

The Medical Mission Sisters are a religious community devoted to the care of the sick in the missions.

Main Activities

Hospitals, dispensaries, home visiting, leprosaria, training native nurses, training native compounders, maternity and child welfare clinics, establishing native Medical Mission Sisterhoods.

Missions

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House of Studies—6th & Buchanan Sts., Washington 17, D. C.
House of Postulate—4374 Grant Rd., Mountain View, Cal.

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Sister M. Richard .. Ass't. Editor
Sister M. Sarah ..... Art editor

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YOUR WILL . . . .

can help the Medical Mission Sisters bring health and healing to the sick and suffering of mission lands. The following approved form of bequest may be used:

"I hereby give (devise) and bequeath to the Society of Catholic Medical Missionaries (also known as the Medical Mission Sisters), an institution incorporated under the laws of the State of Maryland, and its successors forever the sum of $..... for its general purposes."

If you have already made your will, it is not necessary to make a new one. It is sufficient that a codicil be added, using the above form.

CHRISTMAS
FEAST OF UNITY

UNITY . . . how many individuals and organizations are straining and striving today to bring about some sort of world unity. The United Nations with its hundreds of bureaus, the World Health organization, universal armament plans and even a world calendar are part of the movement to smother national diversities and bring an atom-splitting age together. In streetcars and buses, in newspapers, magazines, on radio and television, our attention is being pulled and pushed in one direction after another to someone else's ideas for the achievement of world harmony. Peace . . . Unity . . . sound on all sides. Yet these efforts towards unity seem to create only tension and confusion. They scatter rather than gather the sympathies of men. So the search continues.

Christmas is coming . . . the feast that commemorates the day and the hour on which the "Word was spoken" some nineteen hundred years ago. If the searchers after unity would direct their thoughts toward Bethlehem, they would find the sought-for plan, the blueprint for international harmony. There, the source of world unity lies within the confines of a narrow crib . . . Christ in a feed box, in a barn, in Bethlehem . . . Christ, the God-man who was born among us for the very purpose of gathering all mankind into one family. At His birth the Angels announced that "good tidings of great joy shall be to *all* the people" and that salvation had come to *all* the ends of the earth.

Indians, Germans, Africans, Spaniards, Chinese, French, Americans, Russians . . . *all* peoples adore at the one crib. Around that crib every nation is able to see the Infant . . . a God who took unto Himself a Body in the womb of a virgin in order to be united to humanity . . . around that crib, each nation can look to itself and to its neighbor and recognize sameness. And the Mother of men who stands close by, will permit her Divine Son to be held within the arms of each of His brothers. Christ is their unity . . . Christ their common cause for joy. Through Him the harmony of humanity created by God, destroyed by sin, is restored. Through Him everything that is or is possible takes its proper place in the scheme of creation and, united praises the one God.

Christ came to bring unity to the world 1,951 years ago. He founded a Church whose purpose is to unite men upon earth into one family by a supernatural union of love.

Searchers after unity . . . burdened with your "mind-breaking" problems, the Church, the Mystical Body of Christ, is the only organization that can satisfy your quest. It can do so not because it is human but because it is human and Divine. Within the fold of the one Church, people of every nation can be true to their own culture, can cherish their own heritage and practice their own customs. The unity that the Church would create among men is not a superficial, external agreement but a deep spiritual oneness.

Through the centuries the Church has carried the treasure of peace and unity secure. All Her energies have been directed to the dispensing of that unity throughout the world. One Fold — One Shepherd — every nation under God—united in praise of Him, who made them all—this is the aim of the Church. Missionaries of the Church give their lives to hasten the day of global unity. Missionaries of every age travel the hemispheres to bring the message of Christmas, the glad tidings that salvation has come to every man, uniting all men in a bond of brotherhood in Christ under the Fatherhood of God.

—Sr. M. Richard

A Christmas Wish

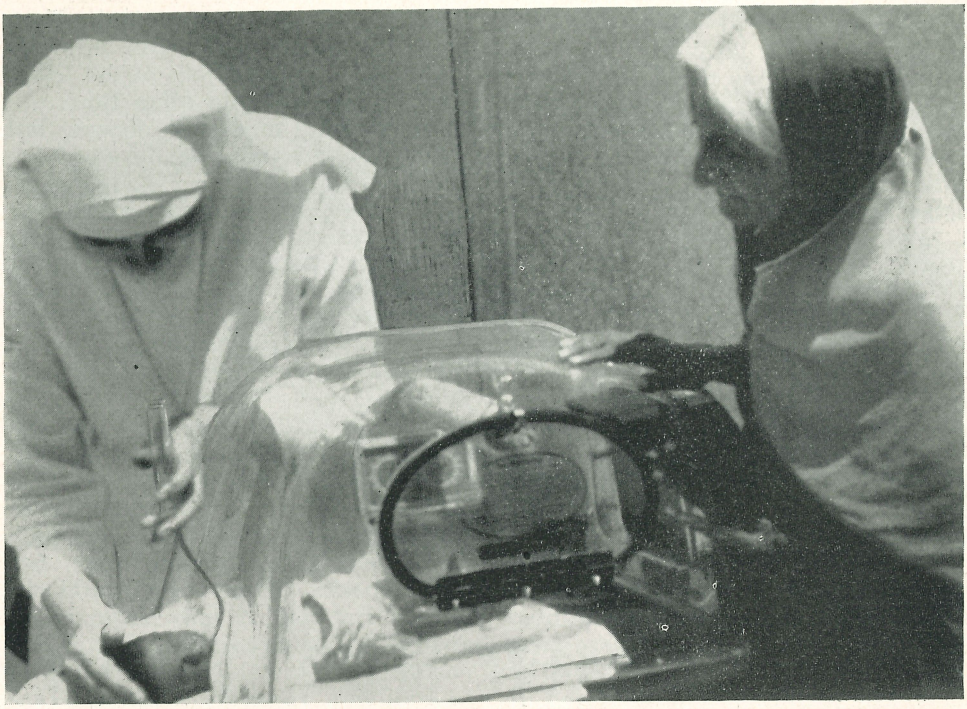
I am wishing for you this day, a HAPPY CHRISTMAS. I would send you those gifts which are beyond price, outlast time, and bridge all space. I wish you all laughter and pure joy, a merrie heart and a clear conscience, and Love which thinks no evil, is not easily provoked, and seeks not its own. . . .

I wish you the fragrance of flowers, the sweet associations of holly and mistletoe and fir, the memory of deep woods, of peaceful hills, and of the mantling snow, which guards the sleep of all God's creatures. I wish that the Spirit of Christmastide may draw you into companionship with Him who giveth all. . . .

The little Christ-hands are beckoning us to come within the circle of His faith and love, where are bright angels and everyday saints, and all goodness, truth and beauty.

It is the FEAST OF THE CHILD.
Come, let us adore HIM.

—Bishop Remington



A CRIB IN KARACHI

This is about Premie and his grandmother, but Granny steals the show. Granny is about 65 years old; Premie is just a few weeks old. We called the baby "Premie" because he won't be given a proper name until he is 40 days old, according to the Mohammedan custom.

The story began when a Mohammedan gentleman came to our Holy Family Hospital here in Karachi and asked if we took babies. Sick ones, was our reply. The man sighed and shrugged his shoulders. "Oh," he said dejectedly, "this baby isn't sick. Its mother died of jaundice eight days ago, just after she gave it birth. It's a premature baby, a boy," he said and his eyes brightened momentarily. "Won't you please take it?" he pleaded. "I was told to come here because you have an incubator from America."

We assured him we would be happy to take his son. "Bring him quickly," we said. "The sooner he is brought to the hospital, the better is his chance of survival." The Mohammedan was still saying his "thank you's" as he backed out of the door, promising to bring the baby at once.

We took out our new incubator, a present from friends in America, and set it up in the duty room. The duty room is, of course, no place for a baby, especially a premature one, but there is absolutely no other space. We have no nursery. The babies stay beside the mothers during the day and they are brought out to the duty room at night. We had everything ready for Premie, but Premie did not come. We assumed he had died.

The next day, two old ladies came to the hospital to look over the place. They were well dressed and did not

seem the type that might walk off with some of the hospital belongings, so we did not try to stop their private inspection tour. They must have been satisfied with what they saw, because one of them said to me, "Memsahib (Madame), do you take babies here?"

"Yes," I said, "we take *sick* babies here."

"This baby is not sick, but its mother, my only daughter died . . ." The poor old lady could not go on. She started to cry. I asked her if the baby was a premature, nine days' old, and if the mother had died of jaundice. She kept nodding, yes. The baby was not dead after all. I told the grandmother to bring the baby to the hospital immediately.

Another day passed. No baby. Perhaps it did die. The next day one of the nurses said that someone wanted me at the back door. There was Granny with Premie, at last. The baby was jaundiced and shriveled. It looked about three pounds in weight. Not a very good candidate to show off our new U. S. A. incubator.

We placed Premie in the incubator. When Sister M. Martin put in the plug, Granny started a big fuss. She did not want the baby to have gas. We had to show her that no gas was going into the chamber, only heat to warm the baby. Achcha (all right), she approved of heat.

Next Granny produced a can of Cow and Gate. "American milk," she said with a smile, and gave orders that it should be given every two hours. It was evident that the baby was too weak to take feeding from a bottle. Sister M. Martin got the tube feeding tray and started to give Premie his dinner. Granny went into her act: she made as if to swoon but when nobody paid any attention, she came out of the faint and demanded that the tube be taken out because it was killing the baby. I had a little talk with Granny. "Do you want to take the baby home?" I asked. No, indeed she didn't. Then there was to be no further interference with our treatment of the baby. Granny was subdued for a time.

We have a clock, of course, but with Granny around we did not have to watch the time for Premie's feeding. If the time went just a bit over the two hours, Granny would ask if the baby's schedule had been changed

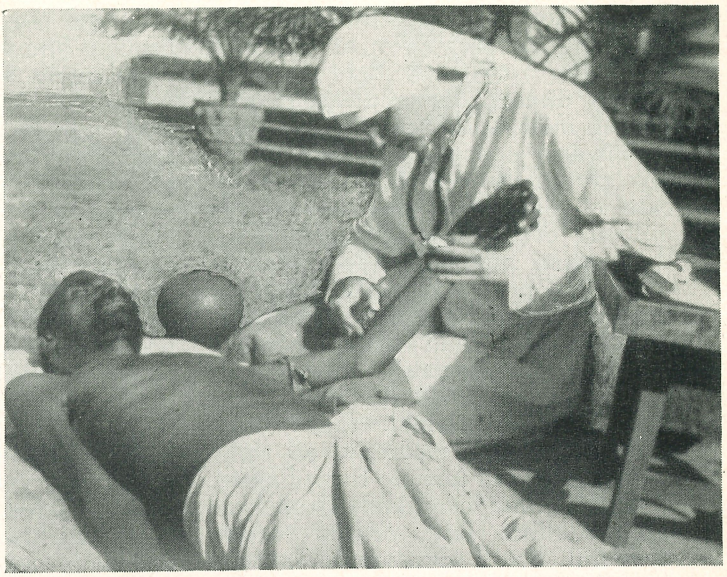
After a few days it was evident that the baby was not assimilating the Cow and Gate feedings. Despite the two-hourly feeding, it became more and more shriveled.

Granny sat. That's all, she just sat. She didn't ask if the baby were better any more. She did not boss us around any more. She stopped watching the clock. Every now and then we noticed a tear sliding down her worn cheeks. What more could we do for Premie? If only some woman could give breast milk? It is not easy to get a woman to give her milk to another's. However, I asked Granny if she knew of any woman who might be induced to give milk, a relative perhaps. The baby would not need much, just a few ounces a day. Granny said she would try. She returned in the evening with a poor woman who needed extra money.

At once Premie improved. In just two weeks' time we noticed a modest bulge in his cheeks where there had been hollows before. He had a good cry and could kick about. We now dared to weigh him. Premie tipped the scales at three and one-half pounds. With that news, Granny got back into form again and started giving orders but no one really minded. We liked her better that way than sitting around crying.

One day another premie was brought to Holy Family Hospital. This baby was skinnier than Premie No. 1. It weighed only two and one-half pounds. What to do, two premies and one incubator? Premie No. 1 would have to change beds and make

(Continued on page 195)



WHERE THE WHEAT WENT

Right now something very remarkable is happening in India. Perhaps it would be more correct to say that the remarkable thing is that something very serious is *not* happening in India. The threat is still there, the situation has not eased up completely yet, but it looks very much as if India is winning the battle against famine this time. Last year the stage was set for a real catastrophe. A poor monsoon, a long period of drought, interrupted by rains at the wrong moment, all conspired to ruin harvest after harvest, until the spectre of famine began to stalk the land.

Famine is nothing new in India. From time immemorial periods of plenty have alternated with times of shortage and want. The country is at the mercy of the weather. If the rains fail, the people starve. Here and there, in the Punjab for instance, large scale irrigation has broken this dependence, but in most provinces irrigation is still on a small and private basis, and wholly inadequate in seasons of drought. Fear of famine is ingrained in the people, yet for the most part they are helpless against it.

Contrary to American notions, India is not covered with rich, green, lush jungle forests. Much of the so-called jungle is mere brush country, covered with weeds, scraggy trees and bushes, rocks, sand and gullies. Such land cannot feed starving people. Lack of rain turns it into a desert in a short time.

Too many Indians are living on the brink of starvation all the time. They are a simple, uncomplaining, rather fatalistic people, and they do not expect much of life. Two meals a day, of rice and a few vegetables, a few sweets on great occasions, and they are satisfied. Their low margin of subsistence leaves them no energy to put in a hard day's work, no interest in the world around them, no initia-

tive or ambition to better their lot. They are an easy prey to infection, and have very little fight in them against disease. Tuberculosis in particular mows them down.

It is easy enough to predict what a few crop failures will do. Take the case of Sita Ram, just one of the millions of landless laborers. When there were no crops, there was no work, and pretty soon Sita Ram had nothing to eat. He had no close relatives except his old mother, and she was blind. So the pair of them turned to begging, and had the rest of the country been normal, they would very likely have made out all right, until the tide of fortune turned again. But this time everybody was hard up, and Sita Ram drifted further downhill every day, until he collapsed on the doorstep of one of the Jesuit mission houses near Patna.

The poor missionary was in a quandry. The man was so weak, and his whole body so swollen with edema, that he did not dare to move him. Yet he lingered on, rest and frequent feedings seemed to put new life in him, and after a few days the priest brought him to Holy Family Hospital. Fortunately we had plenty of good powdered milk, some all-purpose food, rich in protein, and even some special protein injections. Between all these Sita Ram came back to normal in a surprisingly short time. He became thinner than ever, for the swelling disappeared, and every bone in his body became visible. Still, that was a good sign, and with his appetite improving day by day, he started to put on weight at a good rate, and gradually regained his strength.

This is the only case of extreme malnutrition we have seen in Patna so far this year. All the poor people have suffered, and most of the villagers are thin and weak, with poor resistance against illness. We have been kept busy trying to prevent worse consequences, but that still does not make a famine. Holy Family Hospital has tried to do its share, distributing free milk and the all-purpose food we received from America and by strict rationing of rice and wheat. All has helped in averting the disaster in this area. It speaks volumes for the increased sense of social responsibility in the country that this famine has been prevented. The Bengal famine of 1943 has not been forgotten. That one, also, could have been prevented, but it wasn't.

Everyone is breathing easier now that the country is practically out of danger. With the two million tons of wheat from the United States, and with a prospect of decent crops this year, the outlook is a great deal brighter than last year at this time. Prices are coming down, even in the villages and confidence is replacing the distress and anxiety of the past months. Government controlled shops are better stocked, and soon the rations will be increased. The worst is over. India is proving to itself that even a major famine can be checked, if all work together for the common good.

THE BIRTH OF CHRIST
By Angela Trindade

Yusef's Smile

by Sister M. Bernadette

During World War II large airplane hangars were erected on the barren fields of Kala. When the war ended the hangars were abandoned. Today the district is known as "Kala Camp" and it accommodates about 30,000 refugees from Kashmir. Twice a month another Sister and I go to the camp to visit the sick.

On one of my visits to Kala Camp, I met Yusef. He was about eight years old. Yusef's unhappy face shocked me. I approached his "bed," a little mat spread on the cement floor. On questioning him, I learned that his father had been killed during the exodus from Kashmir and that his mother had died of fever soon after their arrival at the camp. An old uncle was taking care of the boy. With tears in his eyes, the uncle asked me to do something to make the boy well. He was in an advanced stage of tuberculosis.

"Come, Yusef, let me see you smile," I said. But Yusef turned his head away, muttering: "I'm cold."

"Well next time I come, I will try to bring you a blanket."

There is so much demand for warm clothes for these poor refugees, that we rarely have any left over. They are distributed as soon as we receive them. But I managed to bring a blanket for Yusef on my next visit. Still he would not smile. His cough seemed worse and he was much weaker. Again I made him as comfortable as I could.

"Tell me, Yusef," I said, "is there anything 'special' that you would care to have me bring you next time?"

"Yes, Sister," he answered, slowly and so weakly, that I could scarcely catch his voice. "I'd like a pagri."

A pagri is the turban worn by a well-dressed man or boy. It is made from a long, narrow piece of very fine cloth, wrapped around the head in a special fashion, with the one end hanging back over the shoulder and the other tucked into the fold over the left ear.

The following week, when I visited Kala Camp, I hurried in the direction of Hangar No. 39. On the way, there is a little mosque where the Muslims congregate to say their prayers. There was a large crowd collected at the entrance to the mosque, and in the midst was Yusef, lying on his mat, in a dying condition.

The pagri in hand, I pushed my way through the crowd.

"Look, Yusef, here is your pagri." And for the first time Yusef smiled. I knelt down by his side and prayed while he hugged the pagri and continued to smile. Thus he slipped away, and, as I believe, smiled his way to Heaven.

Turning to the old uncle who stood there weeping, I said: "At least he can be buried wearing his pagri. He would wish it so. And for you, do not weep, for I am sure he is with God."

CHRISTMAS CHITS

RAWALPINDI

The staff of Holy Family Hospital attended Christmas Mass at the parish church which is about a block away from the hospital. My, how the church was decorated. Japanese lanterns, red, green and white striped were everywhere. Green stars, pasted onto the candles were shining on the altar and overhead were colored crepe paper streamers of red, blue, pink, yellow and green. These were fastened to the side walls so as to make an archway. The Church was packed.

At midnight Father came from the sacristy dressed in cope and carrying the Infant. He was preceded by five altar boys in red cassocks. The length of the cassocks was of no concern, some were ankle, some knee length. Father laid the Infant in the manger and as he did the lights were turned on. Then we could see the rest of the decorations—doorways were decorated with wreaths and paper flowers and the windows were graced with paper plants. The congregation was dressed in vivid colors also.

We sang the first Mass and had Indian music for the second. During the third Mass, we sang carols. It was so nice to see all the nurses and servants at the Midnight Mass. We were all of different creeds, classes and nationalities yet we knelt with one spirit at the feet of the Holy Infant.

PATNA

Despite our lack of snow everyone in Patna had the Christmas spirit. Preparations for Our Lord's birthday begin early for there are close to fifty nurses and fifty servants on the compound. Many have no family so they depend on us for everything.

PATNA

We knit sweaters, remodel old clothes and make toys for our large family.

Sister offered a prize for the best decorated ward and all of the nurses were out to win. The Indian idea of Christmas decorations is quite different from ours. Wards were decorated with yellow, pink and green paper chains. Reminded me more of Easter than Christmas. Each ward had a little crib and candles were everywhere.

We decorated the chapel with poinsettias and green fern and we had a lovely crib. It was visited by non-Christians and Christians alike. They bring fruits, flowers and sweets to the Infant in the manger all during the season. No one doubts that they go away from the Christ Child with better gifts than those they brought.

KARACHI

Holy Family Hospital in Karachi was dressed in holiday attire for Christmas. It looked so cheery and Christmasy with the big crib on the front verandah. The ward boys had made huge lanterns of green, red and white tissue paper in the shape of a star and had hung them over the light. It was really a professional job and they were delighted with the effect.

We had saved presents for the patients from the boxes sent over from the States. We had something for everyone. The babies got powder, lotion or Mennen's oil and two little orphan girls were decked from the skin out, with old clothing from the U. S. It wasn't much but everyone received a gift. The poor patients in the hospital really "make Christmas."

PHILADELPHIA SANTA CLAUS

"What in the name of goodness, is it?"

"I think it's a car."

"It looks like a walking vegetable garden and orchard to me."

"Look, there is a man's hat above that pile of oranges."

"Afternoon, Sisters."

"Good afternoon, Sir."

"Could you use an orange or two and a few potatoes?"

"Yes indeed, we can. My, you look like Santa Claus. I'll get a dozen Sisters to unpack your car."

"Good. Mind the fish in the back. My name's Ross. Jim Phillips told me that you Sisters were here."

"Well, we're certainly here, 150 of us."

"Apart from food, what do you want most at the present moment?"

"A cow. We have some but not enough for milk and the butter we try to make."

"Mooo!"

"Here's the cow—with a monkey on her back!"

"H-mm . . . farm yard and jungle! Last monkey I met face to face was busily engaged in tearing up my sheets."

"Meet my pet, Duke. Want a monkey, Sister?"

"No-o!"

"Don't worry, I wouldn't part with him."

"The cow is a bit wild, but she will soon settle down. See you in a day or two. Never mind the thanks. What did you say? The angels have my name down in golden capitals. Don't you ever believe it, Sister, must be some other Ross."

The author, Sr. M. David, R.N., Mandar's Superintendent of nurses.

OBSTACLE COURSE FOR NURSES

Sr. M. David, R.N.

Imagine being homesick for a mud hut! Some of the student nurses at Holy Family Hospital in Mandar are. For them, a mud hut means "Home Sweet Home." Dark-skinned, short and of stocky build, these inhabitants of India are neither Hindus nor Mohammedans. Their families belong to the Aboriginal tribes of Chota Nagpur. They have a code of customs and habits all their own and many have been Christians for generations.

Life in their villages knows no complexity. Usually they are composed of about 40 mud huts, walled in and surrounded by miles and miles of terraced rice fields. The people trudge from their earthen homes to the well for water—to the fields to harvest—to the shed to winnow and dry their rice crop—back to the hut again. Housekeeping in the Aboriginal homes presents no problem. There is no furniture! The food, rice and vegetables are prepared and eaten with the fingers. One brass bowl, resting on the floor does the work of a whole set of dishes. Breakfast in bed is a daily occurrence since the same floor serves as dining table and "beauty rest" mattress.

Most of the Aboriginal girls who enter Holy Family Hospital's training school, left their homes to attend schools conducted by Catholic Sisters. As boarders, the girls helped the Sisters with the sweeping of the convent and school, and care of the rice fields. Life continued in the same simple pattern they were accustomed to with only a slight variation.

The Sisters taught the girls to read, to write and to do some arithmetic. Personal hygiene was also taught. The course of study in these schools lasted about eight years. Some of the more fortunate graduates continued their studies but in our training school we have only one high

school graduate.

It is easy to imagine the adjustment that must be made when these girls enter nurses training. Biology— bacteria— oxygen— words we have heard since fourth grade mean absolutely nothing to them. It is their first contact with a strange new terminology. The lacrimal bone doesn't mean a thing; to put it in the right place is hard work.

The whole set up of a hospital is foreign to these girls. They must be given a formal introduction to a bed before being taught to make "the contraption." There are no nursing text books in Hindi, which is the language the students speak, so we have a tremendous translation job. All the hospital procedures are taught in Hindi also.

The students need a Sister working side by side with them for at least six months. It is the only way to inculcate correct nursing habits and proper conduct on the wards. Our newest group of students have finally mastered bed making. Now they are ready to be taught how to take a temperature and how to read a thermometer. The second group has advanced to the dispensing of medications and the giving of intramuscular injections.

When the student nurses are off duty, athletic ones play ball, others sew, study or chat in the nurses' quarters. A sad thing is our lack of good reading material in Hindi.

On feast days the nurses sing the Mass. Their Gregorian chant is fine. Now that Christmas is coming we will sing the great Advent antiphons in Hindi.

Holy Family Hospital's training school has its ups and downs but all in all, we need not worry for our Aboriginal girls *do* become good nurses. It just takes time.

★ UNDERSTANDING ASIA ★

To understand Asia better and the complex challenge confronting the United States in this area of the world where more than half the human race lives, Americans would do well to bear these ten points in mind when studying Far East news:

1. Most people in Asia will go to bed hungry tonight.
2. Most people in Asia cannot read or write.
3. Most people in Asia live in grinding poverty.
4. Most people in Asia have never seen a doctor.
5. Most people in Asia have never heard of democracy.
6. Most people in Asia have never known civil liberties.
7. Most people in Asia believe anything different would be better than what they have, and they are determined to get it.
8. Most people in Asia believe that freedom or free enterprise means the freedom of Western colonial powers to exploit Asians.
9. Most people in Asia distrust people with white skins.
10. Most people in Asia are determined never again to be ruled by foreigners. . . . W.D.P. Saturday Review of Literature

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A Crib in Karachi

(Continued from Page 188)

room for Preme No. 2. We made the change while Granny was away. But she didn't seem to mind; by this time she was content to let us do things our way.

Premie No. 1 weighs four pounds now. When he is five pounds, we will discharge our tiny patient. We are trying to prepare Granny for this dismissal. I don't think that it will bother her too much because she has seen othr women bringing their babies back to the hospital for checkups and advice. Granny knows that we will help her keep the baby healthy. The Sisters will be glad to see Premie on these return visits but most of all, we shall be happy to welcome Granny!

Sr. M. Dolores, R.N.

ONE GOD OR MANY

Rev. John Brennan, S.J.

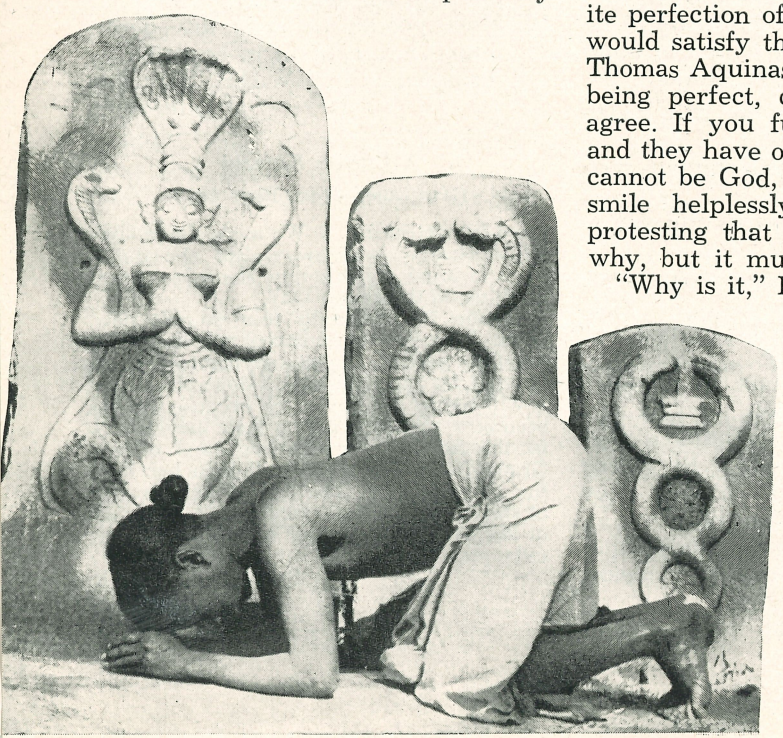
Mahatma Gandhi was once asked in a public meeting if the Ram he invoked as God was the prehistorical Ram, son of Dashratha, perhaps the most popular of the Hindu pantheon. He replied that he believed in but one Supreme Deity, the same whom the Moslems call Allah and the Christians, God. Gandhi was then asked if he looked upon God as a person. He replied, "I should rather look upon God as a force, an all-pervading force." The answer is vague, indeed, and by it the Mahatma proved himself in this matter also truly representative of the Hindu of our age.

I put this question to an itinerant barber, a class of people with the reputation of being very astute: "Hazam, are there many gods, or only one?" He cocked an eye at me and sagely answered: "The foolish and unlettered, such as I, say there are many gods, but the learned say there is but One." This was precisely the opinion expressed by that Hindu priest, whom I had met in an editor's office, as reported in my first article. The priest had said that the developed intellect comes to the knowledge that there is only one Supreme Being; whereas the undeveloped mind, steeped in the material world, looks upon the Deity as manifold.

The fact of the matter, so it seems to me, is that the educated Hindu has become ashamed of polytheism and is therefore a monotheist; or, influenced by the Vedantic system of Hindu philosophy, he professes pantheism, that is, that we and all created things are parts of the One Being. So, you and I are he and they, and all of us are It. Indeed, on one occasion a Brahmin priest overheard my conversation with an Indian Protestant on the nature of God, and he cried out in pride and derision, "God? God? I am God!"

Hindu thinkers explain the infinite perfection of God in a way which would satisfy the Angelic Doctor, St. Thomas Aquinas. If you say that God being perfect, cannot sin, they will agree. If you further urge that you and they have often sinned and hence cannot be God, they will squirm and smile helplessly in their dilemma, protesting that they don't know just why, but it must be so.

"Why is it," I asked a group of in-



The Hindu masses worship many gods.

tellectuals in the editor's office, "that thinkers so often abandon their common sense, a thing the common man wouldn't think of doing? It is due to their pride and infatuation with the philosophical systems they have elaborated. The famous Hindu philosopher of the 8th century, Sankaracharya, rises to the concept of an all-perfect Supreme Spirit, one of infinite being, truth, and joy. Then, when he comes once again to contemplate created beings, he is upset. 'How,' he asks, 'can there be anything besides God, if God is infinite being? If anything else has being, then it has a being which God has not. Therefore, God is not infinite. But God must be infinite! Therefore there can be nothing except God!' For this philosopher the appearances of things are deceptions. He denies the veracity of his senses and of the intellect by which he has come to the idea of God rather than deny the infinite perfection of God."

I cited, too, the case of that other great Hindu philosopher of the 11th century, Ramanuja, who arrived at a different conclusion. Says he, the things we see are real, but they are all appearances of the one Supreme Being. In spite of the differences among things they are all One, or parts of the One, which shows itself under diverse bodily forms.

The ordinary man in the street, the man of common sense, believes in a Maker of all because he instinctively believes in the principle of causality. So if his Hindu priests tell him that Ram is god, and so is Ganesh, Shiva, Hanuman, Brahma, Vishnu, and Krishna, plus a thousand and one others, he naturally believes they are all distinct gods. He believes that these gods and goddesses come and possess the stones and mud piles he marks with vermillion. Indeed, the priests encourage him, saying that this suits his mentality, and after all, God is in all, God is all.

I once asked a teacher, a man much esteemed by his fellows, how he could believe that the Ganges River was a goddess. He explained that everything, which is one, has a form or spirit and that such a bounteous thing as the mighty Ganges has a mighty spirit. It is therefore a goddess. I told him that it seemed as reasonable to me to call a stream of water, poured from a glass, one being and divine; but he would not have it so. No, the Ganges is really a goddess, and she is offered human sacrifice, too. Some months ago, at a spot not far from where I live, goats were tied up and thrown far out into the river by Hindu priests. Devout Hindus plunged in after them, each hoping to save a sacred victim and so bring upon himself the blessing of the goddess. In the struggle several lost their lives.

To sum up, then: there are Hindus who believe in no God at all; there are others influenced by Christianity, who believe in one God; and the masses believe in many divinities. Among the latter, some explain their belief in the many as parts or manifestations of the great, all pervading One. In common practice they are not aware of these distinctions but worship each as a distinct personality—and very colorful personalities, too.

May They Rest in Peace

Rev. Frederick J. Schulte, C.S.C., South Bend, Indiana
Sr. M. James, Malabar, So. India
Mr. Peter Van Agtmael, Hart, Mich.
Mr. Fred. H. Elking, Dayton, Ohio
Miss Florence Kenney, Brookline, Mass.
Mrs. Sarah McKeaney, Philadelphia, Pa.
Mr. Leo Menard, Fall River, Mass.
Lieut. Daniel Murphy, Watsonville, Cal.
Mrs. Petronella Raaphorst, Lisse, Holland
Miss Cecilia Ryan, Washington, D. C.
Mrs. Wm. Schermerhorn, Schenectady, N. Y.

TWI TALK

A Berekum Christmas

Sr. M. Raphael, B.S. Pharm.

Christmas eve was busy: last minute touches to the cookies, red ribbons for the windows, fresh linen and flowers for the chapel, and a hundred and one other things all needing the Christmas touch. These "touches" were interspersed with a hundred and one trips to the dispensary. There seemed to be that many *emergency* cases that night. The parade of patients started. . . .

8:p.m.

"Sister, I beg you, this woman is very sick."

"For how long?"

"Only today." (mentally you add a minimum of 48 hours)

"Why didn't you come to morning dispensary?"

"Because, etc., etc."

8:30 p.m.

"This man is unconscious."

"Has he been sick?"

"Oh no, only tonight we found him in this condition."

"Has he been drinking?" (Profound consternation. The thought of it!)

"Oh no, he doesn't know how to drink."

"How much has he been drinking?" (Still dismay, this time a bit weaker. Palm wine does not leave alcoholic smell on the breath. The diagnosis is made because it is Christmas eve.)

"We don't know what he had, he was all alone."

"He does not get any medicine until you tell me what he had."

"Well, only two bottles of palm wine, etc."

9:p.m.

"This woman has had fever (only three days), we beg you to treat her."

9:30 p.m.

The family of the maternity patient who is staying with us, comes to call.

10:00 p.m.

This time a whole lorry full of Mohammedans come with a patient —a small boy who is really very sick —fever and jaundice for ten days. They are from a village 30 miles away. For the hundredth time we ask: "Why didn't you come sooner?"

"We came tonight because it is Christmas." (We are still trying to figure that one out.)

11:00 p.m.

Finally we all get to bed and then the relatives of the maternity patient come to tell us that the woman can't sleep.

12:00 a.m.

We have two Masses in our Chapel during which the patient's relatives

call Sister out twice. They heard the singing and were curious.

1:45 a.m.

After a lunch of cocoa and Christmas cookies, we retire. But all is not quiet in the white light of the full moon.

2:00 a.m.

Sr. M. Paula fumbles at Sr. M. Raphael's mosquito net, whispering: "Sister, do you hear anything outside?"

"Yes, swishing sounds, like sweeping."

"Look, should there be a fire in the kitchen?"

"Heavens, no."

"Well there is one there now, someone is there. We had better investigate."

Out went Sr. M. Paula to investigate. She found Kwabena, our little twelve year old cook's mate, sitting on a stool in front of the kitchen door. His eyes were shining and he had a wonderful smile on his face, the perfect picture of a child who has just opened his Christmas presents. Kwabena had finished his morning chores and had built a roaring fire.

"Kwabena, what are you doing here?"

"Sister told me to come early in the morning and get the fire ready for the turkey." His face was an expression of puzzlement. He had received his Christmas present the previous evening and he could not sleep after such excitement. The town was alive with moonlight and merrymaking and this little fellow had no idea of time. He dreaded being late. The Sisters' turkey depended on him.

All the solicitude about the turkey dated back to the previous day. Francis, the cook and Kwabena had purchased a huge tom turkey for our Christmas dinner. Sister Margaret Mary questioned the state of the bird's health after she saw it tottering around the yard. Francis rose to defend the turkey. He told Sister what a venerable bird the turkey was. He assured Sister that it was the oldest bird he could buy. Young Kwabena was equally enthusiastic; he reported that the turkey was at least a grandfather if not a great grandfather. Sister Margaret Mary was mentally calculating the time needed for cooking such a distinguished elder.

Then Francis got the bad news that he would have to get the turkey off the veranda and into the oven as fast as he could if we were to have it at all. As the afternoon wore on, the boys chopped wood and stoked the little stove. Their esteem for antiquity paled and they wished they had chosen a less venerable bird. Hence Kwabena's deep sense of responsibility. He knew King Turkey had had four hours that afternoon and that he would need another four hours if he were to make an appearance on our Christmas dinner table.

After a good laugh, Sister found Kwabena a blanket. He went to sleep by the fire until daybreak.

Twi is the basic language spoken by the principal tribes, in the Gold Coast, B. W. Africa.

Mission Needs

POONA

needs scales—all kinds—pharmaceutical, baby and adult.

PHILADELPHIA

Sister medical student needs a combined otoscope and opthalmoscope.

Sister printer needs an automatic press.

Sister bookbinder needs a standing book press.

Indian Chewing Gum

Sister M. Adelaide, S.C.M.M.

Chewing gum manufacturers!

The "after-dinner mints" were being passed. There was quite an assortment including cardamon seed, betel nut, and bright green pan leaves decorated with silver foil. One of our Indian nurses selected the pan, but everyone else contented themselves and fulfilled their social obligations by nibbling on a cardamon seed. When my turn came I, too, took the pan. Such an opportunity to sample this delicacy of the East could not be passed by. For a year I had been trying to find out what pan tasted like . . . by asking other people.

Trying to be nonchalant, I put the folded tidbits into my mouth and began to chew. What was a big mouthful was soon reduced to a manageable wad. To an uncultivated taste, such as mine, it was neither pleasing nor displeasing — like the Indian sweets, it might be classed as neutral. There was a little bitterness, but not half as bad as I had expected. Bravely I chewed on and things began to happen. Soon I was thoroughly convinced that I had three pairs of salivary glands and that they were all working at once. I wondered what to do. What was the proper etiquette at an Indian dinner party? There was a plate on the table in front of me. There was a nice Oriental rug on the floor which discouraged any unladylike temptation I might have had in that direction. So with a courage which defied all the germs of India, I took a big gulp and swallowed.

"Murder, accident, death"—blood stains every few feet along the Indian streets give a stranger good material for a mystery story. That red splash against the wall is not blood or paint; that red mark on the once white leg of the Sacred Cow ambling up the road makes one look twice to see how badly she is injured. But the veteran in India knows that all this red does not indicate bloody murder, but is merely the evidence of pan chewing. Whether to compare pan chewing to tobacco chewing at home, or whether it is more akin to our chewing gum is a question. Since all Eastern peoples chew the pan, the rich and the poor, the young and the old, in its universality it takes on the popularity of our bit of rubbery substance coated with sugar.

Fastidious chewers make their own

pan, but it is much simpler to buy one for a pice from the pan-wala across the street. He takes the betel leaf which he has kept fresh in water, smears a dash of lime paste on it, a dash of red mixture from the juice of a tree, some cracked betel nut, deftly folds the leaf in a triangle and hands it to you. Gold and silver foil decorated ones may cost a rupee or two, I learned—so my "after-dinner mint" had been an expensive one.

Your rich friends will have all their favorite ingredients in a beautiful silver or enamel box, which is divided into tiny compartments. They may contain cardamon, tumeric, anice, grated cocoanut, peppermint, a mixture of aromatic spices, or tobacco. The connoisseur is very particular about his pan. If a bit of a certain spice is missing, it makes quite as much difference to him as if you were handed a stick of Spearmint when you really preferred Juicy Fruit. Your poor friends may not have the silver box, but their tin one will contain the same assortment.

There is only one drawback to pan chewing, and it discourages vain people. The copious flow of brick-red saliva which results, blackens the teeth, dyes the mouth, lips and gums. A perpetual chewer is as obnoxious as grandfather with his tobacco cud. And of course, the Indian is not as careful as grandfather with his cuspidor. The ground, the floor, the sidewalk, do just as well—and a little red dye adds color to the scene, which in the hot sun quickly turns to an unobtrusive brown.

If all the pan sellers in India united there would be a big business. As it is this big business is carried on in a small way, each pan-wala being his own proprietor. He buys in small quantities and sells in small quantities, and manages to eke out a living. He secures the pan leaves from the betel vine whose cultivation requires special care and attention. The betel nut which comes from the betel palm is round, about the size of a hickory nut, and hard throughout with a mottled appearance inside. The limepaste is common calcium oxide from the earth. One wonders why the lime keeps the whitewash on the wall so white, and helps turn the pan leaf so red. As we said before, the spices may be anything. Such is the Indian chewing gum. When you come to India be sure and have a chew.

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In HIS Name we thank you and wish you a blessed Christmas and New Year.

Hopefully yours,

MOTHER ANNA DENGEL, M.D.

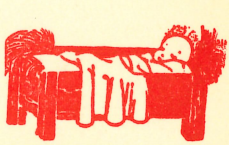
Dear Mother Dengel,

Here is my contribution $_____ for the children's wing of the new hospital.

Name _____

Address _____

City _____ Zone ____ State _____



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